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APPLICANTS

Annette Torkildsen, Vinterbro, NORWAY;
Sylvia Moller, Hakadal, NORWAY;

** CONTINUING DATA *****

This application is a 371 of PCT/NO03/00353 10/24/2003

** FOREIGN APPLICATIONS *****

NORWAY 2002 5254 11/01/2002

** SMALL ENTITY **

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NORWAY	SHEETS DRAWING 4	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

William B. Patterson
Moser Patterson & Sheridan
3040 Post Oak Boulevard
Suite 1500
Houston , TX 77056

TITLE

Auxiliary product for use with a tampon

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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